

# Family Plan

## Main Family Residence

Address \_\_\_\_\_

Fire/Emergency Medical Service No. \_\_\_\_\_ Telephone \_\_\_\_\_

## Family Information

Name						
Date of Birth						
Social Security No.						
Usual Weekday Location						
Doctor						
Special Medical Info.						
Medical Insurance Info.						

\_\_\_\_\_’s Workplace

Address \_\_\_\_\_

Telephone \_\_\_\_\_

\_\_\_\_\_’s Workplace

Address \_\_\_\_\_

Telephone \_\_\_\_\_

\_\_\_\_\_’s Workplace

Address \_\_\_\_\_

Telephone \_\_\_\_\_

\_\_\_\_\_’s School

Address \_\_\_\_\_

Telephone \_\_\_\_\_

\_\_\_\_\_’s School

Address \_\_\_\_\_

Telephone \_\_\_\_\_

\_\_\_\_\_’s School

Address \_\_\_\_\_

Telephone \_\_\_\_\_

## Nearest Relative

Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

## Plan how your family will stay in contact if separated by disaster.

### Choose two meeting places:

**Reunion Location** (a safe distance from your home)

Location Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

**Alternative Location** (a place outside your neighborhood)

Location Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

## Choose an out-of-town friend or family member, as a contact for everyone to call.

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_

Cellular Number \_\_\_\_\_

## Designate a room in your home if you have to stay for several days.

Room \_\_\_\_\_ (Keep your emergency kit stored in this room.)

## Designate a place where your family will be able to stay for a few days in case of evacuation.

Location Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

# Emergency Kit Checklist

**The following items should be part of your emergency kit and kept in a container that can be easily carried.**

- |  |   |
|--|---|
| <input type="checkbox"/> Bottled water (One gallon of water per person per day, to last three days.)   | <input type="checkbox"/> Prescription medicine                                    |
| <input type="checkbox"/> Canned or dried food (A three-day supply of non-perishable food items for each person. Remember a manual can opener.) | <input type="checkbox"/> Clean clothes and sturdy shoes                           |
| <input type="checkbox"/> Battery-powered radio   | <input type="checkbox"/> Extra credit card  |
| <input type="checkbox"/> Flashlight  | <input type="checkbox"/> Extra money  |
| <input type="checkbox"/> Extra batteries for radio and flashlight  | <input type="checkbox"/> Sturdy trash bags  |
| <input type="checkbox"/> First-aid kit   | <input type="checkbox"/> Formula and baby food if there is an infant in your home |

## Listen for Information

**Listen for information about what to do and where to go during an emergency. City, county, and state officials have developed emergency plans. During an emergency, it is important to follow their instructions and advice.**

**Other things to consider:**

- ☐ Know the emergency and evacuation plans for your workplace. (Keep a supply of water and canned food, a flashlight, battery-powered radio, change of clothes, and a pair of shoes at your desk or in your locker.)
- ☐ Review the building’s emergency and evacuation plans if you are a senior citizen or a disabled person living in a special care facility.
- ☐ Identify people who can help you during an emergency if you are disabled living at home or have special medical needs.
- ☐ Learn about emergency plans at your child’s school or day care center. (Make sure they have up-to-date contact information for you and another member of your family.)
- ☐ Keep a small, portable emergency supply kit in your car at all times. (Include a gallon of water, several cans of food, and a manual can opener, a sleeping bag or extra blanket, extra money, and first-aid supplies.)
- ☐ Consider your pet when preparing for an emergency.

### Discuss this information with your entire family.

To learn more about preparing for an emergency, visit [www.dhss.mo.gov](http://www.dhss.mo.gov) or contact your local public health department.

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